

## PART B - FEE(S) TRANSMITTAL

Completed and send this form, together with applicable fee(s), to: Mail

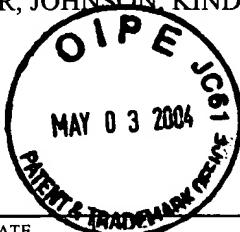
**Mail Stop ISSUE FEE  
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**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for mailing fee notifications.

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26389 7590 03/19/2004

CHRISTENSEN, O'CONNOR, JOHNSON, KINDNESS,  
PLLC  
1420 FIFTH AVENUE  
SUITE 2800  
SEATTLE, WA 98101-2347



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### Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Morry Benton	(Depositor's name)
	(Signature)
May 30, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/226,044 01/05/1999

ALLAN S. HOFFMAN

XXXXXX

1587

TITLE OF INVENTION: ENHANCED TRANSPORT USING MEMBRANE DISRUPTIVE AGENTS

UWOTL118949

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	06/21/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
KISHORE, GOLLAMUDI S	1615	424-450000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<b>Christensen O'Connor Johnson Kindness PLLC</b>	
2 _____	
3 _____	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

University of Washington  
University of Massachusetts

Seattle, Washington  
Boston, Massachusetts

Please check the appropriate assignee category or categories (will not be printed on the patent):

4a. The following fee(s) are enclosed:

- Issue Fee
- Publication Fee
- Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- A check in the amount of the fee(s) is enclosed. Check No. 155277
- Payment by credit card. Form PTO-2038 is attached.
- The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-1740 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

George E. Renzoni, Ph.D. Reg. No. 37,919

(Authorized Signature) George E. Renzoni (Date) 4-30-04

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05/05/2004 DEMMANU2 00000179 09226044

01 FC:2501  
02 FC:1504

665.00 OP  
300.00 OP

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